

prostration. Morphia was the only drug that at all mitigated the suffering, but in consequence of its administration the patient was wretchedly troubled with headache and constipation and he was forced to abandon its use. He therefore prescribed the following mixture, one ounce to be taken three times a day, and it acted like a charm: val. belladonnæ, nine minims: val. hyoscyami, two scruples; syr. aurantii, two drachms; water, six ounces. The epoch has now been robbed of its terrors for her. Writing the other day from Germany to her mother, she says the last six months are the only happy ones she has known since the function was established. In the other four cases there was likewise considerable suffering, and in these also complete relief was afforded. He prescribes it to be begun a day before the period is expected, and continued while the pain requires it. The valoids employed are those manufactured by Messrs. Burroughs, Wellcome & Co., and for obtaining the characteristic action of the drugs Dr. Shaw knows of no preparations that equal them. The old-fashioned tincture, though perhaps a trifle more elegant, is at once feeble, expensive and unreliable. In the majority of them the spirit is the active ingredient.—*Med. Press.*

TREATMENT OF TYPHOID FEVER.

In compliance with the request of the Sydney Board of Health, Dr. W. Pierce, medical superintendent of the Coast Hospital, has reported upon the treatment of cases of typhoid fever, of which the rate of mortality during the first five months of the present year has been unusually low. Dr. Pierce, in his memorandum, states that, in cases received within the first ten days of the disease, calomel (three to five grains) is administered; and after that acetanilide, in five grain doses, whenever the temperature exceeds a certain point (101° to 103°), up to six or eight times in the twenty-four hours. The effect of this is to cause a fall of temperature in about forty minutes, attaining its minimum in from two to four hours, with concomitant fall in the pulse and respiration rates, with decrease of arterial tension and profuse sweating. The tendency to delirium is diminished, and there is "a remarkable feeling of ease and repose, which appears partly to depend on the production of a

certain amount of peripheral anæsthesia." When the effect of the drug passes off, the temperature often rises with great rapidity. He considers this treatment to have many advantages over cold bathing. He has given the drug continuously for several weeks, and has not found it contraindicated, even when there were cardiac complications. It renders the course of the fever milder, but it may not lessen the duration of the disease. In all cases where it is freely given there is liability to occasional cyanosis of extremities and face, with irregular pulse. Alcohol was given very sparingly, and generally only in cases of failing heart, and Dr. Pierce thinks that the prolonged use of alcohol is very injurious.—*Lancet*, September 15.

TREATMENT OF CHANCROID.

The most satisfactory treatment for chancroid which I have employed is thorough cauterization with pure nitric acid and the subsequent application of salicylic acid powder; the object being, first, to convert the infected ulcer into a healthy one, and then to prevent reinfection of the wound. While this method succeeds admirably among the better class of patients, it often fails completely in hospital practice from a failure to carry out the after-treatment. I have frequently seen reinfection take place in ulcers that have been perfectly healthy for several days, by simple contact with clothing upon which the dried secretions from the original sore had been allowed to remain. A method which in my hands has proved valuable in this class of cases, but which, as will be seen, is applicable only to chancroids occurring behind the corona glandis, is the following: The organ is cleansed with a strong solution of bichloride—all ulcerated points thoroughly destroyed by nitric acid. Salicylic acid powder is then heaped upon the wound and covered by a thin rubber protective which completely encircles the penis. This should be snugly applied and held in place by a few layers of absorbent gauze and a small bandage. The heat and moisture of the body soon cause the thin rubber tissue to adhere closely to the skin, completely sealing the wound; its elasticity, also, allows of considerable change in the size of the penis without disturbance. This dressing should be left in place for from three to six days, and completely